

**WOMEN'S CLUB OF NEWBURGH, INC.**  
**2017-2018 GRANT APPLICATION**  
Requests must be received by January 15, 2018



## Contact Information

---

---

**Name of Organization**

**Street Address**

**City**

**State**

**Zip Code**

**Organization Website**

---

**Organization President /  
Executive Director**

**Title**

**Phone Number**

**E-Mail Address**

---

**Contact Person  
(if different)**

**Title**

**Phone Number**

**E-Mail Address**

---

---

# Organization Information

501 (c) (3)?

Yes

No

Year Established

---

**Total Organization Budget**

**Total # of Board Members**

**Total # of Staff**

**Total # of Volunteers**

---

Major Source of Funding

**Organizational Mission  
Statements**

(500 characters or less)

**Brief Description of  
Organization**

(500 characters or less)

**Population Served**

(200 characters or less, include age groups, race & ethnicity, income levels, etc.)

---

---

## Proposal Request

**Program / Project Name**

**Total Program Budget**

**Requested Amount**

**Percent of Total Budget**

---

**Reason for Request**

**Grant Period From**

**Grant Period To**

**Multi-Year?**

Yes

No

---

**Geographic Area Served**

**Number of potential individuals to be affected by this request**

**How many in Warrick County**

**Priority funding areas  
of grant makers**

(indicate how your request fits  
within the grant maker's strategic  
interest[s])

**Most recent grants received from this funder:**

Amount (1)

Date (1)

Amount (2)

Date (2)

**Agreement**

**The Women's Club of Newburgh requires that grant recipients send conformation of allocations. As a condition of each grant, a follow-up report is to be provided by September 1, 2018, as well as, at completion of project.**

**Please read instruction page before submitting.**

---

**SIGNATURES**

Applicant Signature and Title

Date:

Womens Club Member Signature

Date: